Form 83-181-99-8-1-000 (Rev.12/99)

Name of Reporting Corporation

Page 1

## Mississippi Supplemental Application for Automatic Six-Month Extension for Corporation Income and Franchise Tax Return Year

FEIN:

Enter additional names of qualified members of an affiliated group below. Include the subtotal from this schedule in the total amount for Form 83-180 Page 1, Line 4.

Name of Other Members of an Affiliated Group	Federal Employer Identification Number	Tentative Amount of Franchise Tax (Minimum \$25.00 Per Corporation)
o	σ	
v	ω	
σ	σ	
σ	ω	
σ	ω	
σ	ω	
σ	ω	
v	ω	
w	ω	
v	ω	
v	ω	
w	σ	
w	ω	
ω	ω	
ω	ω	
σ	σ	
σ	σ	
ω	ν	
σ	σ	
σ	σ	
ω	ω	
ω	ω	
Subtotal (Include this amount in the Tota	l on Line 4, Page 1, Form 83-180.)	
,	,	<b>L</b>

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Supplemental	Page	OI

## Mississippi Supplemental Application for Automatic Six-Month Extension for Corporation Income and Franchise Tax Return

Name of Reporting Corporation	FEIN:			
Traine of Nepoting Corporation	FEIIN.			
Enter additional names of qualified members of an affiliated group below. Include the subtotal from this schedule in the total amount for Form 83-180, Page 1, Line 4.				
Name of Other Members of an Affiliated Group	Federal Employer Identification Number	Tentative Amount of Franchise Tax (Minimum \$25.00 Per Corporation)		
S	S			
S	S			
S	S			
S	σ			
σ	σ			
σ	σ			
σ	Ø			
σ	Ø			
σ	Ø			
w	Ø			
σ	Ø			
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ø	ø			
ø	ø			
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o	σ			
S	တ			

Subtotal (Include this amount in the Total on Line 4, Page 1, Form 83-180.)

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